



Please type a plus sign (+) inside this box → +

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Kelley et al.
Title	Dual Stage Inflator for Low Melting Gas Generants
Group Art Unit	
Examiner Name	
Attorney Docket Number	834 US

I hereby appoint:

☒ Practitioners at Customer Number

20346

Place Customer
Number Bar Code
Label here

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

20346

Place Customer
Number Bar Code
Label here

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Kevin Fitzgerald

Signature

Kevin Fitzgerald

Date

12 June 03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 5 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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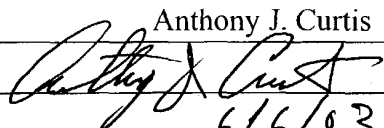
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SIGNATURE of Applicant or Assignee of Record

Name	Anthony J. Curtis
Signature	
Date	6/6/03

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	
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First Named Inventor	Kelley et al.
Title	Dual Stage Inflator for Low Melting Gas Generants
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Dennis A. Trevillyan

Signature

Dennis A. Trevillyan

Date

5/6/03

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Michael Mulville

Signature

Date

6/6/03

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number

Filing Date

First Named Inventor

Title

Group Art Unit

Examiner Name

Attorney Docket Number

Kelley et al.

Dual Stage Inflator for Low Melting Gas Generants

834 US

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Michael E. Kelley

Signature

Michael E. Kelley

Date

6-6-03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 5 forms are submitted.

JUN 30 2003

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	834 US
First Named Inventor	Kelley et al.
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Dual Stage Inflator for Low Melting Gas Generants

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒Customer Number
or Bar Code Label

20346

OR ☐

Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventorGiven Name Michael Eugene
(first and middle [if any])Family Name Kelley
or SurnameInventor's
Signature*Michael Eugene Kelley*

Date 6-6-03

Valrico

FL

U.S.A.

U.S.A.

Residence: City

State

Country

Citizenship

1309 Brahma Dr.

Mailing Address

Valrico
CityFL
State33594
ZIPU.S.A.
Country

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventorGiven Name Anthony J.
(first and middle [if any])Family Name Curtis
or SurnameInventor's
Signature*Anthony J. Curtis*

Date 6/6/03

Palm Harbor
Residence: CityFL
StateU.S.A.
CountryU.S.A.
Citizenship

2741 Nicole Cir.

Mailing Address

City

FL
State34684
ZIPU.S.A.
Country☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION**ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Michael Felix Given Name		Mulville Family Name or Surname	
Inventor's Signature <i>Michael F. Mulville</i>		Date	
Bartow Residence: City	FL State	U.S.A. Country	U.S.A. Citizenship
875 East Stuart Street Mailing Address			
Mailing Address			
Bartow City	FL State	33830 ZIP	U.S.A. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Dennis A. Given Name		Trevillyan Family Name or Surname	
Inventor's Signature <i>Dennis A. Trevillyan</i>		Date <i>6/6/03</i>	
Plant City Residence: City	FL State	U.S.A. Country	U.S.A. Citizenship
2302 Ashley Ct. Mailing Address			
Mailing Address			
Plant City City	FL State	33566 ZIP	U.S.A. Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Kevin Given Name		Fitzgerald Family Name or Surname	
Inventor's Signature		Date	
Mesa Residence: City	AZ State	U.S.A. Country	U.S.A. Citizenship
6604 East Regina Street Mailing Address			
Mailing Address			
Mesa City	AZ State	85215 ZIP	U.S.A. Country

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
with Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Dock t Number

834 US

First Named Inv ntor

Kelley et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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(Title of the Invention)

the specification of which



is attached hereto

OR



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Application Number

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Direct all correspondence to: <input checked="" type="checkbox"/>		Customer Number or Bar Code Label		20346		OR <input type="checkbox"/> Correspondence address below	
Name							
Address							
City				State		ZIP	
Country			Telephone			Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR :				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Michael Eugene (first and middle [if any])				Family Name Kelley or Surname			
Inventor's Signature						Date	
Valrico			FL		U.S.A.		U.S.A.
Residence: City			State		Country		Citizenship
1309 Brahma Dr.							
Mailing Address							
Valrico			FL		33594		U.S.A.
City			State		ZIP		Country
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Anthony J. (first and middle [if any])				Family Name Curtis or Surname			
Inventor's Signature						Date	
Palm Harbor			FL		U.S.A.		U.S.A.
Residence: City			State		Country		Citizenship
2741 Nicole Cir.							
Mailing Address							
			FL		34684		U.S.A.
City			State		ZIP		Country
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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DECLARATION**ADDITIONAL INVENTOR(S)****Supplemental Sheet**Page 1 of 1

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Inventor's Signature		Date	
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